

**RECEIVED
CENTRAL FAX CENTER**

SEP 20 2004

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of

Gustafson et al.

For: SHOCK ISOLATION BEARINGS AND TRAVEL LIMIT GAPS IN A SPINDLE MOTOR AND DISK DRIVE USING THE SAME

Serial No.: 09/846,054

Filed: April 30, 2001

Atty. Docket No.: K35A0459

Examiner: Mark S. BLOUTIN

Art Unit: 2653

Confirmation No.: 4487

AMENDMENT

CERTIFICATE OF TRANSMISSION

I hereby certify that this document and the documents referred to herein are being transmitted by facsimile to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, fax number 703-872-9306 on September 20, 2004.

Nita J. Miller

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

The present paper is responsive to the Office Action mailed May 27, 2004. Applicants respectfully request an extension of time for one month from August 27, 2004, to September 27, 2004. The Commissioner is hereby authorized to charge the fee due under 37 CFR §1.17(a)(1) (fee code 1251) in the amount of \$110 to Deposit Account No. 23-1209, referencing Docket No. K35A0459. A duplicate copy of this sheet is attached.

Amendments to the claims may be found beginning at page 2 of this paper.

Remarks and arguments may be found beginning at page 17 of this paper.

Page 1 of 19

Serial No. 09/846,054
Attv Docket No K25A0459

11/29/2004 01:38:20 PM * PAGE 221 * RCVD AT 07/20/2004 6:36:46 PM (Eastern Daylight Time) * SVR:USPTO-EFAXF-1/4 * DNS:8729306 * CSID:6508517232 * DURATION (mm:ss):05:46
01 FC:1251 110.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

09/846054

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

9/20/04 CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* <u>65</u>	Minus ** <u>67</u>	=
Independent	* <u>3</u>	Minus *** <u>3</u>	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	375.00
X\$ 9=	
X <u>43</u> =	
+140=	
TOTAL	

RATE	FEE
BASIC FEE	750.00
X\$18=	
X <u>86</u> =	
+280=	
TOTAL	

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X <u>43</u> =	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X <u>86</u> =	
+280=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X <u>43</u> =	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X <u>86</u> =	
+280=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X <u>43</u> =	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X <u>86</u> =	
+280=	
TOTAL ADDIT. FEE	